



*Payroll Department
Web Access Agreement - Student Payrolls*

Section I - Please check one

New Account Request

Account Update

Section II - To be completed by the Dean, Director, or Department Head

This is to certify that the designee named below is authorized to process student labor and student work-study employment transactions through the Student Payroll web application. Please assign a confidential account and password to this designee. I understand that I am required to notify the Payroll Department if these responsibilities are removed from this individual.

Name of Designee: _____

Department: _____

WinJa User ID: _____

Distribution U-Box(es): _____

Designee's Email: _____

Furthermore, by delegating this responsibility, I understand that I (and my designees) will no longer be signing Student Employment Authorizations. This agreement will replace the signature requirement needed for the former "paper" process.

Print Name and Title

Signature

Date

Section III - To be completed by employee

As an employee at the University of Connecticut, I am aware that the data to which I have access is to be treated in a professional and confidential manner. This information will be used only in the conduct of official internal business of my department or college and will not be disclosed to any third party.

Print Name and Title

Signature

Date